

L17000007647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

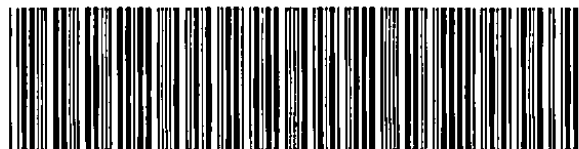
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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FILED  
2018 MAR 15 AM 10:09

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Art Diss  
w/nct

MAR 16 2019  
I ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **BY-STELLA LLC**

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Stella Dupree**

(Name of Person)

**BY-STELLA LLC**

(Firm/Company)

**5803 Hollyhock Dr**

(Address)

**Lakeland FL 33813**

(City/State and Zip Code)

2019 FEB 21 AM 11:16

For further information concerning this matter, please call:

**Stella Dupree**

(Name of Person)

at ( **863** ) **370-0672**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &  
Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 27, 2019

STELLA DUPREE  
BY-STELLA, LLC  
5803 HOLLYHOCK DR  
LAKELAND, FL 33813

SUBJECT: BY-STELLA, LLC  
Ref. Number: L17000076477

We have received your document for BY-STELLA, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 519A00004123

RECEIVED  
2019 MAR 14 PM 12:10  
TALLAHASSEE, FL

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2019 MAR 15 AM 10:05

1. The name of a limited liability company is  
BY-STELLA LLC

2. The Articles of Organization were filed on February 8 / 2019 and assigned  
document number L17000076477

3. The delayed effective date the dissolution if not effective on the date of filing: 02-08-2019  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

This is my own decision

Not in business never work out, lost of money. I like to Terminate

all this LLC, corporation I don't owe

any money to any body. The money that i loss is my

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Stella Dupree

5803 Holly Hoek. DR.

LAKELAND, FL. 33813

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Stella Dupree  
Signature

STELLA DUPREE.  
Printed Name

FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: BY-STELLA LLC

Document number of Limited Liability Company is: L17000076477

Date of dissolution was: 02-08-2019

Description of information that must be included in a written claim:

I like to terminate this corporation because this business did not work for me anfortunate

i loss money instead of making any sales.

IS MY OWN DECITION TO CHOSE THIS BUSSINE  
DON'T OWE ANY MONEY TO ANY body.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Stella Dupree

5803 Hollyhock Dr

Lakeland

Florida 33813

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

STELLA DUPREE

Printed Name of the Person Filing



Signature of the Person Filing